

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00136

Entity Name: KOLB ENTERPRISES, INC.

FILED  
Jan 11, 2012  
Secretary of State

**Current Principal Place of Business:**

871 HAWKSBILL ISLAND DRIVE  
SATELLITE BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 372208  
SATELLITE BEACH, FL 32937 US

**New Mailing Address:**

FEI Number: 59-2652350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KOLB, LAURA  
871 HAWKSBILL ISLAND DR.  
SATELLITE BEACH, FL 32937 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: ST  
Name: KOLB, LAURA  
Address: 871 HAWKSBILL ISLAND DR.  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: P  
Name: KOLB, FRANK  
Address: 871 HAWKSBILL ISLAND DR.  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: O  
Name: MOBLEY, KELLY N  
Address: 1611 WHITMAN DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KELLY MOBLEY

SECR

01/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date